S-E-C-R-E-T (Win filled in)

Voucher No. 8535 14 March 1961

MEMORANDUM FOR: Chief, Finance Division

ATTENTION

Monetary Branch

SUBJECT

Disbursement of Treasury Check

1. It is kindly requested that a U. S. Treasury Check be drawn in favor of the company listed hereunder in the amount stated, which will be applicable to the contract or agreement shown. The contract number and invoice identification must appear on the chack.

Check drawn in favor of: Mgorton, Germechausen & Orier, Inc.

b.

e. Contract Number:

M1.027.31 22-2191

d. Invoice Number: e. Check to be dated:

98-and 99

- 2. Pertinent documentation in connection with this classified transaction is on file in the office of the Comptroller, DPD-DD/P.
- 3. The check should be dated as stated in Paragraph 1 and mailed in the attached self-addressed envelope. If no envelope is attached, the undersigned should be contacted on extension 8737/8738 when payment is ready for disposition.
- The payment request is based on progress made by the contractor to date an should be processed against General Ledger Account No. 138, titled "Disbursements of Appropriated Funds Chargeable to Confidential Funds Allotments - Awaiting DCI Certification." See Comptrollers Instruction No. 32 and Comptrollers Notice No. 20-56, approved by the DCI on 15 December 1960. The General Ledger Account, Allotment Symbol, and Object Class applicable to this request is as follows:

CEN LEDGER

ACCOUNT

ALLOTMENT ACCOUNT 1128-1966-5300

OBJECT CLASS

OBL.

REP.

CONTONA

CREDIT

#1.027.11

Dist:

Addressee

SIGNED

VI - Contract TE 2191 (Post)

1 - Voucher File

EL:nh/DPD-Fin/14 March 1961

Authorized Certifying Officer 14 March 1961

25X1

Standard Form No. 1034 Approved For Release 2008/12/11: CIA-RDP65-00523R000100160014-0 1034-106 ICES OTHER THAN PERSONAL ž. Use continuation sheet(s) if necessary BU. VOU. NO.__ PAID BY U. S. _ (Department, bureau, or establishment) Voucher prepared at _____ (Give place and date) Payee's Account No. ______ Discount Terms __ Edgerton, Germeshausen and Grier, Inc. Las Vegas, Nevada (Address) Invoice Rec'd. Date TE-2191 Date Req. No. Contract No. Govt. B/L No. Weight Shipped from ARTICLES OR SERVICES UNIT PRICE AMOUNT No. and Date of Date of Delivery (Enter description, item number of contract or Federal supply Quantity
Order or Service schedule, and other information deemed necessary) Cost Per Invoice No. \$37,297.55 98 (Orig. Inv. Att) 3,729.76 99 (Orig. Inv. ATT) \$41.027.31 TOTAL (PAYEE MUST NOT USE THIS SPACE) PAYMENT: STAT_ DIFFERENCES COMPLETE PARTIAL FINAL * 41 027.31 Amount verified; corr **PROGRESS** (Signature or initials) ADVANCE that † Approved for _____ =\$ ____ nent. Title ___ =\$1.00 Exchange rate ___ cting Officer) THE REVERSE OF THIS FORM MUST BE EXECUTED WHEN PURCHASES AR ACCOUNTING CLASSIFICATION (Appropriation nal) on Treasurer of the United States Check No. ______ on_ Paid by (Name of Bank) ___, 19___ Payee * When used in foreign countries, insert name of currency of country in which used. † If the ability to certify and authority to approve are combined in one person, one signature only is necessary; otherwise the approving officer will sign on the line below "Approved for \$ ___ over his official title. Title_

RII	YOU, NO.	98

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Date 4/25/57 to	Req. No. Weight	Date (Govt. B/L	*****	ce Rec'd.
ARTICLES C	OR SERVICES er of contract or Federal	supply Quantity			AMOUNT
schedule, and other infor	mation deemed necessa	ry)	Cost	Per	•
Month of January	1961				
Direct Labor			}		\$13,958.42
Materials & Serv	ices				5,874.16
Travel					314.27
			1		14,071.09
G & A					3,079.61 \$37,297.55
					\$37,297.55
			TOTAL		337.297.55
(PAYE	E MUST NOT USE THIS	SPACE)			751717177
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		(Signature o	or initials)		
		cher is correct a	nd proper	for pay	
	*				STAT
		Authorized Certifying (Officer)		(Date)
ITING CLASSIFICATION (Appro	opriation Symbol must	be shown; other	classification	on optic	onal)
	19. WJ 60				**************************************
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sert name of currency of country in whici	th used.	Per			
	State Secretarian Secretarian Secretarian	Itonth of January 1961 Direct Labor Haterials & Services Travel Burden G & A (PAYEE MUST NOT USE THIS	(PAYEE MUST NOT USE THIS SPACE) Compared Tender Compared Tender	TOTAL (PAYEE MUST NOT USE THIS SPACE) Pursuant to authority vested in methics voucher is correct and proper	Cost Per Per Cost Per

Stendfrd Form No. 103 Approved For Release 2008/12/11: CIA-RDP65-00523R000100160014-0

Polic Voucher for Purchases and

Services Other Than Personal

CONTINUATION SHEET

	Date of ARTICLES OR SERVICES		OULL	UNIT PRICE		AMOUNT
No. and Date of Order	Delivery or Service	(Enter description, item number of contract or Federal supply schedule, and other information deemed necessary)	QUAN- TITY Cost	Cost	Per	
Januar	, 1961 Ho	Direct Labor \$13,958.42 Naterials & Services 5,874.16 Travel 314.27 *Burden 14,071.09 Total Direct Costs G & A Total Direct Costs @ 96 *Burden: Premium Direct Labor-\$12,563.47 @	112%-	07، 14ن	1.09	\$3 ⁴ ,217.9 3,079.6 \$37,297.9

Standard Form No. 1034 Approved For Release 2008/12/11: CIA-RDP65-00523R000100160014-0 7 GAO 5030 1034-107 PUBLIF YOUCHER FOR PURCHASES: AND 1034-107 SERVICES OTHER THAN PERSONAL

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•	Use continuation sheet(s) if necessary		BU. VO	J. NO	99
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ayee's Account No.	Discount Terms			n = 1	End=2 1581-61
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(Address)					
ontract No. TH-2191	Date $\frac{1}{2}/26/57$ Req. No.	Date			Rec'd.
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lo. and Date of Date of D	ARTICLES OR SERVICES elivery (Enter description, Item number of contract or Federal supp	y Quantity	UNIT P		AMOUNT
Order or Serv	schedule, and other information deemed necessary)	-	Cost	Per	•
	Fixed Fee January 1961				\$3,729.76
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1			TOTAL		ψ3,729.76
YMENT:	(PAYEE MUST NOT USE THIS SPA	CE)			
_		DIFFERENCES			
COMPLETE					
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FINAL					
	4		.0 1		3,729.76
PROGRESS		Amount veri			11.116
ADVANCE		(Signature o	or initials)_	28	
	Pursuant to c	authority ves	sted in me,	I certify	that
***	=\$ this voucher				
			,		
	· · · · · · · · · · · · · · · · · · ·	zed Certifying C	Officer)		(Date)
change rate	=\$1.30				
THE	REVERSE OF THIS FORM MUST BE EXECUTED WHEN PURCHASES ARE MADE OR SERVICES SECURI	D WITHOUT WRIT	ITEN AGREEMENT	IN ANY FOR	M
ACC	OUNTING CLASSIFICATION (Appropriation Symbol must be sh	own; other	classificatio	n option	al)
Check No	on Treasu	rer of the U	nited State	es	
Charle Na					
aid by Check No.			(Nai	me of Bank)	
Cash, \$, on, 19	ayee			
	ies, insert name of currency of country in which used.				
† If the ability to certify and a	suthority to approve are combined in one person, one signature only is nec-	er			
sary; otherwise the approving of er his official title.	fficer will sign on the line below "Approved for \$", and	tle			
a ma Cinciai mie.	1				

Stendard Form No. 103 Approved For Release 2008/12/11: CIA-RDP65-00523R000100160014-0 7 GAO 5030 1035-105 Polic Voucher for Purchases and Services Other Than Personal

CONTINUATION SHEET

nd Date	Date of	ARTICLES OR SERVICES		UNIT PRICE		AMOUNT
Order	Delivery or Service	(Enter description, item number of contract or Federal suppleschedule, and other information deemed necessary)	QUAN- TITY	Cost	Per	
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